Accreditation Decision and Report

Decision to re-accredit service following a site audit

**Service and approved provider details**

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| --- | --- |
| **Name of service:** | Opal Melville |
| **RACS ID:** | 7237 |
| **Name of approved provider:** | DPG Services Pty Ltd |
| **Address details:** | 15 Cottrill Street MYAREE WA 6156 |
| **Date of site audit:** | 11 September 2019 to 13 September 2019 |

**Summary of decision**

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| **Decision made on:** | 11 October 2019 | |
| **Decision made by**: | Authorised delegate of the Aged Care Quality and Safety Commissioner (Commissioner) under section 76 of the *Aged Care Quality and Safety Commission Act 2018* to decide under section 41 of the Aged Care Quality and Safety Commission Rules 2018 (Rules) about the accreditation of a service. | |
| **Decision:** | To re-accredit the service under section 41 of the Rules. | |
| **Further period of accreditation:** | 09 November 2019 to 09 November 2022 | |
| **Assessment of performance with the Aged Care Quality Standards** | | |
| Standard 1 Consumer dignity and choice | | Met |
| Requirement 1(3)(a) | | Met |
| Requirement 1(3)(b) | | Met |
| Requirement 1(3)(c) | | Met |
| Requirement 1(3)(d) | | Met |
| Requirement 1(3)(e) | | Met |
| Requirement 1(3)(f) | | Met |
| Standard 2 Ongoing assessment and planning with consumers | | Met |
| Requirement 2(3)(a) | | Met |
| Requirement 2(3)(b) | | Met |
| Requirement 2(3)(c) | | Met |
| Requirement 2(3)(d) | | Met |
| Requirement 2(3)(e) | | Met |
| Standard 3 Personal care and clinical care | | Met |
| Requirement 3(3)(a) | | Met |
| Requirement 3(3)(b) | | Met |
| Requirement 3(3)(c) | | Met |
| Requirement 3(3)(d) | | Met |
| Requirement 3(3)(e) | | Met |
| Requirement 3(3)(f) | | Met |
| Requirement 3(3)(g) | | Met |
| Standard 4 Services and supports for daily living | | Met |
| Requirement 4(3)(a) | | Met |
| Requirement 4(3)(b) | | Met |
| Requirement 4(3)(c) | | Met |
| Requirement 4(3)(d) | | Met |
| Requirement 4(3)(e) | | Met |
| Requirement 4(3)(f) | | Met |
| Requirement 4(3)(g) | | Met |
| Standard 5 Organisation’s service environment | | Met |
| Requirement 5(3)(a) | | Met |
| Requirement 5(3)(b) | | Met |
| Requirement 5(3)(c) | | Met |
| Standard 6 Feedback and complaints | | Met |
| Requirement 6(3)(a) | | Met |
| Requirement 6(3)(b) | | Met |
| Requirement 6(3)(c) | | Met |
| Requirement 6(3)(d) | | Met |
| Standard 7 Human resources | | Met |
| Requirement 7(3)(a) | | Met |
| Requirement 7(3)(b) | | Met |
| Requirement 7(3)(c) | | Met |
| Requirement 7(3)(d) | | Met |
| Requirement 7(3)(e) | | Met |
| Standard 8 Organisational governance | | Met |
| Requirement 8(3)(a) | | Met |
| Requirement 8(3)(b) | | Met |
| Requirement 8(3)(c) | | Met |
| Requirement 8(3)(d) | | Met |
| Requirement 8(3)(e) | | Met |

**This decision is published on the Aged Care Quality and Safety Commission’s (Commission) website under section 48 of the Rules.**

Site Audit Performance   
Assessment Report

The Commission makes the decision taking into account this site audit report, any response by the provider, and any other relevant information.

The met/not met recommendations made by the Assessment Team in this site audit report may differ from the findings in the decision.

## Introduction

**This is the report of an assessment of Opal Melville (the Service) conducted from 11 September 2019 to 13 September 2019.**

**This assessment was conducted for the purposes of assessing the provider’s performance in relation to the Service against the Aged Care Quality Standards (the Quality Standards) in accordance with the Aged Care Quality and Safety Commission Rules 2018.**

This report details the findings of this performance assessment and contains a detailed report about the performance of the Service against each Quality Standard assessed and the requirements within each Standard assessed rated as either, Met or Not Met.

For a ‘Not met’ finding, the Assessment Team has provided information about why the requirement was Not Met.

This Report is to be read in conjunction with the Quality Standards.

## Assessment Details

The assessment was informed by a site assessment, observations at the service, review of documents and interviews with staff, consumers/representatives and others.

The following interviews were undertaken:

| **Type** | **Number** |
| --- | --- |
| Acting care manager | 1 |
| Regional general manager | 1 |
| Consumers | 13 |
| Representatives | 7 |
| Care staff | 4 |
| Registered nurses | 3 |
| Enrolled nurse | 1 |
| General manager | 1 |
| Lifestyle coordinator | 1 |
| Chef | 1 |
| Regional quality advisor | 1 |
| Administration staff | 1 |
| Occupational therapist | 1 |

## Detailed findings

This section covers information about the assessment of the provider’s performance, in relation to the service, against each of the requirements of the Quality Standards that were assessed.

### Standard 1: Consumer dignity and choice Met

#### Consumer outcome:

1. I am treated with dignity and respect, and can maintain my identity. I can make informed choices about my care and services, and live the life I choose.

#### Organisation statement:

2. The organisation:  
  
a) has a culture of inclusion and respect for consumers; and   
b) supports consumers to exercise choice and independence; and   
c) respects consumers’ privacy.

#### Summary of Assessment of Standard 1:

The Assessment Team found that the organisation has met all six requirements under Standard 1.

Of consumers and representatives randomly interviewed, 100% said staff always treat them with respect. The organisation uses regular consumer surveys and use formal and informal feedback mechanisms to ensure that consumers are satisfied that staff treat them with respect and support them to live the life they choose. Consumers/representatives said they are satisfied that care and services including personal care, are undertaken in a way that respects their privacy.

The organisation demonstrated that consumers are treated with dignity and respect and that the service actively promotes a culture of inclusion. Consumers described the ways their social connections are supported both inside and outside of the service.

Staff were observed engaging with consumers respectfully and could provide examples of consumers’ individual preferences and interests including by giving consumers clear and accurate information and options to inform their choice.

The organisation demonstrated how electronic and filing systems support the protection of confidential information including consumer information consistent with documented policies and procedures.

#### Requirements:

##### Standard 1 Requirement 3(a) Met

The organisation demonstrates that each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

##### Standard 1 Requirement 3(b) Met

The organisation demonstrates that care and services are culturally safe.

##### Standard 1 Requirement 3(c) Met

The organisation demonstrates that each consumer is supported to exercise choice and independence, including to:

(i) make decisions about their own care and the way care and services are delivered; and

(ii) make decisions about when family, friends, carers or others should be involved in their care; and

(iii) communicate their decisions; and

(iv) make connections with others and maintain relationships of choice, including intimate relationships.

##### Standard 1 Requirement 3(d) Met

The organisation demonstrates that each consumer is supported to take risks to enable them to live the best life they can.

##### Standard 1 Requirement 3(e) Met

The organisation demonstrates that information provided to each consumer is current, accurate and timely, and communicated in a way that is clear, easy to understand and enables them to exercise choice.

##### Standard 1 Requirement 3(f) Met

The organisation demonstrates that each consumer’s privacy is respected and personal information is kept confidential.

### Standard 2: Ongoing assessment and planning with consumers Met

#### Consumer outcome:

1. I am a partner in ongoing assessment and planning that helps me get the care and services I need for my health and well-being.

#### Organisation statement:

2. The organisation undertakes initial and ongoing assessment and planning for care and services in partnership with the consumer. Assessment and planning has a focus on optimising health and well-being in accordance with the consumer’s needs, goals and preferences.

#### Summary of Assessment of Standard 2:

The Assessment Team found the organisation has met all five requirements of Standard 2.

Of consumers randomly selected, 100% said they have a say in their daily activities always or most of the time.

Consumers advised their care is well planned to meet all their needs, and they feel safe and confident because staff took the time to listen and understand how to support their health and well-being. Consumers say they know how to get a copy of their care and services plan if they want it.

Staff involved in assessment and planning described how it’s undertaken to meet the consumers’ needs, goals and preferences. Staff provided examples of inclusive care planning which is tailored to meet the particular preferences of consumers.

Staff know how to access services or organisations to provide information to consumers on end of life planning or palliative care if the consumer wishes to include these in their care plan.

The organisation demonstrated it monitors reports and keeps improving outcomes for consumers through effective assessment and planning.

#### Requirements:

##### Standard 2 Requirement 3(a) Met

The organisation demonstrates that assessment and planning, including consideration of risks to the consumer’s health and well-being, informs the delivery of safe and effective care and services.

##### Standard 2 Requirement 3(b) Met

The organisation demonstrates that assessment and planning identifies and addresses the consumer’s current needs, goals and preferences, including advance care planning and end of life planning if the consumer wishes.

##### Standard 2 Requirement 3(c) Met

The organisation demonstrates that assessment and planning:

(i) is based on ongoing partnership with the consumer and others that the consumer wishes to involve in assessment, planning and review of the consumer’s care and services; and

(ii) includes other organisations, and individuals and providers of other care and services, that are involved in the care of the consumer.

##### Standard 2 Requirement 3(d) Met

The organisation demonstrates that the outcomes of assessment and planning are effectively communicated to the consumer and documented in a care and services plan that is readily available to the consumer, and where care and services are provided.

##### Standard 2 Requirement 3(e) Met

The organisation demonstrates that care and services are reviewed regularly for effectiveness, and when circumstances change or when incidents impact on the needs, goals or preferences of the consumer.

### Standard 3: Personal care and clinical care Met

#### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

#### Organisation statement:

2. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being

#### Summary of Assessment of Standard 3:

The Assessment Team found that the organisation meets all seven requirements under this standard.

Of consumers and representatives randomly interviewed, 93% said they get the care they need always or most of the time and 7% said they get the care they need some of the time.

Consumers said they are getting personal and clinical care that reflects their individual needs and situation and that supports their health and well-being.

Staff described how the organisation supports them to deliver personal and clinical care that is best practice and meets the needs of each consumer. They can also describe how they access information about best practice.

Staff described how they refer consumers to other individuals, organisations or providers and how they collaborate to meet the diverse needs of consumers.

The organisation demonstrated it keeps improving its performance against this requirement. This includes how it changes its policies, procedures and practices based on best practice evidence.

#### Requirements:

##### Standard 3 Requirement 3(a) Met

The organisation demonstrates that each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:

(i) is best practice and

(ii) is tailored to their needs and

(iii) optimises their health and well-being.

##### Standard 3 Requirement 3(b) Met

The organisation demonstrates that effective management of high impact or high prevalence risks associated with the care of each consumer.

##### Standard 3 Requirement 3(c) Met

The organisation demonstrates that the needs, goals and preferences of consumers nearing the end of life are recognised and addressed, their comfort maximised and their dignity preserved.

##### Standard 3 Requirement 3(d) Met

The organisation demonstrates that deterioration or change of a consumer’s mental health, cognitive or physical function, capacity or condition is recognised and responded to in a timely manner.

##### Standard 3 Requirement 3(e) Met

The organisation demonstrates that information about the consumer’s condition, needs and preferences is documented and communicated within the organisation, and with others where responsibility for care is shared.

##### Standard 3 Requirement 3(f) Met

The organisation demonstrates that timely and appropriate referrals to individuals, other organisations and providers of other care and services.

##### Standard 3 Requirement 3(g) Met

The organisation demonstrates that minimisation of infection related risks through implementing:

(i) standard and transmission based precautions to prevent and control infection; and

(ii) practices to promote appropriate antibiotic prescribing and use to support optimal care and reduce the risk of increasing resistance to antibiotics.

### Standard 4: Services and supports for daily living Met

#### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

#### Organisation statement:

2. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

#### Summary of Assessment of Standard 4:

The Assessment team found that the organisation has met all seven requirements under Standard 4.

Of consumers and representatives randomly interviewed, 93% of consumers/representatives agreed they are encouraged to do as much as possible for themselves. However, 7% of consumers and representatives interviewed responded never to the question are you encouraged to do as much for themselves.

Consumers are satisfied with the services they receive especially in relation to their physical care and the food at the service.

The Assessment Team observed the service provides meals of suitable quality, variety and quantity and provides safe, suitable, clean and well-maintained furniture.

The organisation supports consumers to connect with other supports and people outside of the service. The service seeks advice from consumers about activities of interest to them within the service through a social committee, resident and relative meetings and feedback mechanisms.

Services and supports are provided in line with consumers’ assessed needs, goals and preference and service plans are in place for consumers and policies and procedures support staff to deliver care and services in accordance with care and services plans and when required makes timely referrals to other organisations.

#### Requirements:

##### Standard 4 Requirement 3(a) Met

The organisation demonstrates that each consumer gets safe and effective services and supports for daily living that meet the consumer’s needs, goals and preferences and optimise their independence, health, well-being and quality of life.

##### Standard 4 Requirement 3(b) Met

The organisation demonstrates that services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.

##### Standard 4 Requirement 3(c) Met

The organisation demonstrates that services and supports for daily living assist each consumer to:

(i) participate in their community within and outside the organisation’s service environment; and

(ii) have social and personal relationships; and

(iii) do the things of interest to them.

##### Standard 4 Requirement 3(d) Met

The organisation demonstrates that information about the consumer’s condition, needs and preferences is communicated within the organisation, and with others where responsibility for care is shared.

##### Standard 4 Requirement 3(e) Met

The organisation demonstrates that timely and appropriate referrals to individuals, other organisations and providers of other care and services.

##### Standard 4 Requirement 3(f) Met

The organisation demonstrates that where meals are provided, they are varied and of suitable quality and quantity.

##### Standard 4 Requirement 3(g) Met

The organisation demonstrates that where equipment is provided, it is safe, suitable, clean and well maintained.

### Standard 5: Organisation’s service environment Met

#### Consumer outcome:

1. I feel I belong and I am safe and comfortable in the organisation’s service environment.

#### Organisation statement:

2. The organisation provides a safe and comfortable service environment that promotes the consumer’s independence, function and enjoyment.

#### Summary of Assessment of Standard 5:

The Assessment Team found that the organisation meets all three requirements under Standard 5.

Of consumers and representatives randomly interviewed, 100% of consumers/representatives reported consumers feeling safe and comfortable within the service environment. Consumers said they have spaces to interact with others and spaces for quiet reflection. Consumers also advised the service environment makes them feel welcome.

The service was observed to be welcoming, clean and well maintained. The layout of the service environment enables consumers to move around freely. The furniture, fittings and equipment were observed to be safe, clean, well maintained and suitable for the consumer.

The organisation demonstrated it can purchase, service, maintain, renew and replace indoor and outdoor, furniture, fittings and equipment.

#### Requirements:

##### Standard 5 Requirement 3(a) Met

The organisation demonstrates that the service environment is welcoming and easy to understand, and optimises each consumer’s sense of belonging, independence, interaction and function.

##### Standard 5 Requirement 3(b) Met

The organisation demonstrates that the service environment:   
i) is safe, clean, well maintained and comfortable; and   
ii) enables consumers to move freely, both indoors and outdoors.

##### Standard 5 Requirement 3(c) Met

The organisation demonstrates that furniture, fittings and equipment are safe, clean, well maintained and suitable for the consumer.

### Standard 6: Feedback and complaints Met

#### Consumer outcome:

1. I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.

#### Organisation statement:

2. The organisation regularly seeks input and feedback from consumers, carers, the workforce and others and uses the input and feedback to inform continuous improvements for individual consumers and the whole organisation.

#### Summary of Assessment of Standard 6:

The Assessment Team found all four requirements under Standard 6 were met.

Of consumers and representatives randomly interviewed, 86% said staff always follow up when they raise things with them, and 14% said staff follow up when they raise things with them most or some of the time. Consumers and representatives understand how to give feedback or make a complaint, and when they give feedback or make a complaint are comfortable and safe with the process.

Staff described how they encourage and support consumers to provide feedback and make complaints.

Staff demonstrated their awareness of and understanding the operation of the organisation’s complaint handling system.

The organisation demonstrated that feedback and complaints are reviewed and used to improve the quality of care and services.

#### Requirements:

##### Standard 6 Requirement 3(a) Met

The organisation demonstrates that consumers, their family, friends, carers and others are encouraged and supported to provide feedback and make complaints.

##### Standard 6 Requirement 3(b) Met

The organisation demonstrates that consumers are made aware of and have access to advocates, language services and other methods for raising and resolving complaints.

##### Standard 6 Requirement 3(c) Met

The organisation demonstrates that appropriate action is taken in response to complaints and an open disclosure process is used when things go wrong.

##### Standard 6 Requirement 3(d) Met

The organisation demonstrates that feedback and complaints are reviewed and used to improve the quality of care and services.

### Standard 7: Human resources Met

#### Consumer outcome:

1. I get quality care and services when I need them from people who are knowledgeable, capable and caring.

#### Organisation statement:

2. The organisation has a workforce that is sufficient, and is skilled and qualified, to provide safe, respectful and quality care and services.

#### Summary of Assessment of Standard 7:

The Assessment Team found that the organisation has met all five requirements in relation to Standard 7.

Of consumers/representatives randomly interviewed, 100% of consumers/representatives agree that staff are kind and caring and know what they are doing always or most of the time. Consumers said the workforce is competent and staff have qualifications, skills and knowledge to do their jobs effectively and communicate in a way that builds positive relationships with consumers.

Interactions between consumers, representatives and staff were observed to be kind, caring and respectful of each consumer’s identity, culture and diversity.

The organisation demonstrated it has and uses a skilled and qualified workforce to deliver and manage safe, respectful and quality care and services. Organisational systems ensure staff work within the scope of practice, responsibilities and skills and clinical care is delivered in line with current legislation, guidance and the organisation’s clinical governance framework.

The organisation ensures the workforce receive the initial and ongoing support, training, professional development, supervision and feedback to carry out their roles and responsibilities.

The organisation regularly assesses, monitors and reviews its workforce through effective human resource systems.

#### Requirements:

##### Standard 7 Requirement 3(a) Met

The organisation demonstrates that the workforce is planned to enable, and the number and mix of members of the workforce deployed enables, the delivery and management of safe and quality care and services.

##### Standard 7 Requirement 3(b) Met

The organisation demonstrates that workforce interactions with consumers are kind, caring and respectful of each consumer’s identity, culture and diversity.

##### Standard 7 Requirement 3(c) Met

The organisation demonstrates that the workforce is competent and the members of the workforce have the qualifications and knowledge to effectively perform their roles.

##### Standard 7 Requirement 3(d) Met

The organisation demonstrates that the workforce is recruited, trained, equipped and supported to deliver the outcomes required by these standards.

##### Standard 7 Requirement 3(e) Met

The organisation demonstrates that regular assessment, monitoring and review of the performance of each member of the workforce.

### Standard 8: Organisational governance Not Met

#### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

#### Organisation statement:

2. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

#### Summary of Assessment of Standard 8:

The Assessment Team found the organisation demonstrated it met four of the five requirements in relation to Standard 8.

Of consumers/representatives randomly sampled, 100% said that they feel the service is well run and they feel safe.

The organisation’s governing body is responsible for the setting the strategic priorities for the organisation and promotes a culture and commitment to safety and quality.

Management described how the organisation is working towards an organisation wide approach to involving consumers in developing, delivering and evaluating their care and services. The service currently uses consumer experience surveys, meetings, consultations and forums with consumers, representatives and staff to share information and seek input about the consumer experience and the quality of care and services they have received.

Management could describe how the authority effectively flows from the governing body to the Chief Executive Officer, to executive, national and state management teams and then throughout the organisation.

The organisation demonstrated a whole of organisation governance framework is in place which includes personal and clinical care and is across key areas of governance including information management, continuous improvement, finance and workforce governance, regulatory compliance and feedback and complaints.

However, the organisation has failed to demonstrate that the service has an appropriate understanding of their responsibilities in identifying and responding effectively to incidents or allegations of abuse and reporting of these incidents according to regulatory requirements.

#### Requirements:

##### Standard 8 Requirement 3(a) Met

The organisation demonstrates that consumers are engaged in the development, delivery and evaluation of care and services and are supported in that engagement.

##### Standard 8 Requirement 3(b) Met

The organisation demonstrates that the organisation’s governing body promotes a culture of safe, inclusive and quality care and services and is accountable for their delivery.

##### Standard 8 Requirement 3(c) Not Met

The organisation demonstrates that effective organisation wide governance systems relating to the following:

(i) information management

(ii) continuous improvement

(iii) financial governance

(iv) workforce governance, including the assignment of clear responsibilities and accountabilities

(v) regulatory compliance

(vi) feedback and complaints

##### Standard 8 Requirement 3(d) Met

The organisation demonstrates that effective risk management systems and practices, including but not limited to the following:

(i) managing high-impact or high-prevalence risks associated with the care of consumers

(ii) identifying and responding to abuse and neglect of consumers

(iii) supporting consumers to live the best life they can

##### Standard 8 Requirement 3(e) Met

The organisation demonstrates that where clinical care is provided - a clinical governance framework, including but not limited to the following:

(i) antimicrobial stewardship

(ii) minimising the use of restraint

(iii) open disclosure